

Attorney Docket No.: PALM-3541.SG



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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I hereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.						
Date of Deposit: Name of Person KATHERINE RINALDI Signature of the Person Making the Deposit: Making the Deposit: Making the Deposit: Name of Person Making						
In re Application of: Shawn Getterny, Francis James Canova Jr. and Roger Flores						
Application No.:09/724,197 Examiner: Wang						
Filed: 11/27/00 Art Unit: 2697						
Confirmation No.: 7885						
For: CONTROLLABLE PIXEL BORDER FOR IMPROVED VIEWABILITY OF A DISPLAY DEVICE						
Commissioner for Patents P.O. Box 1450						
Alexandria, VA 22313-1450 <u>AMENDMENT TRANSMITTAL</u>						
•						
Transmitted herewith is an amendment for this application						
Transmitted herewith is a response to an office action for the above identified patent application. (15 sheets)						
Transmitted herewith are sheets of substitute formal drawings. Other:						
2. Applicant is other than a small entity						
Extension of Term						
The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.						
(a) [X] Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)						
<u>Extension</u> <u>Fee</u>						
[] one month \$120.00 [X] two months \$450.00						
[] three months \$1,020.00						
[] four months \$1,590.00						
Fee \$ 450.00						
If an additional extension of time is required, please consider this a petition therefor.						
[] Applicant believes that no extension of term is required. However, this conditional petition i being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.						

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Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)						
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total	
Total Claims	23	- 23 =	0	x \$18.00	\$0.00	
Independent Claims	3	- 3 =	0	x \$84.00	\$0.00	
Multiple Dependent Claim Fee (one or more, first added by this amendment) \$260.00						
Total Fees					\$0.00	

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$450.00
- Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer Number: 45549

Respectfully submitted,

Date: 18 April 2005

Reg. No. 46.315